FORM D

UNITED STATES 144

SECURITIES AND EXCHANGE COMMISSION

Washington, D.C. 20549

FORM D

NOTICE OF SALE OF SECURITIES PURSUANT TO REGULATION D, SECTION 4(6) AND/OR UNIFORM LIMITED OFFERING EXEMPTION

OMB AP	PROVAL
MB NUMBER:	3235-0076
Expires:	August 30, 2008
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ours per response	16,00

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	Date R	eceived	
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	nendment and name has changed, and indicate chang nase Units of limited liability company interest	Section
Filing Under (Check box(es) that apply): Type of Filing: New Filing Ame	Rule 504 Rule 505 Rule 506 ndment	Section 4(6) 0 ULOF 2008
	A. BASIC IDENTIFICATION DATA	
1. Enter the information requested about the iss	uer	Weshington, DC
Name of Issuer (Check if this is an amend NextSlide Imaging, LLC	ment and name has changed, and indicate change.)	101
Address of Executive Offices 157 Common Lane, Beverly, MA 01965	(Number and Street, City, State, Zip Code)	Telephone Number (Including Area Code) 978.764.0393
Address of Principal Business Operations (if different from Executive Offices)	(Number and Street, City, State, Zip Code)	Telephone Number (Including Area Code)
Brief Description of Business Imaging.	PROCESSED	a
	OCT 1 5 2008	08061675
	limited partnership, all LADINSON REUTER limited partnership, to be formed Lim	Ger (please specify): ited Liability Company
	ganization: Month 0 4 0 7 ganization: Enter two-letter U.S. Postal Service abbreviation for CN for Canada; FN for other foreign jurisdiction)	☐
GENERAL INSTRUCTIONS		

Federal:

Who Must File: All issuers making an offering of securities in reliance on an exemption under Regulation D or Section 4(6), 17 CFR 230.501 et seq. or 15 U.S.C. 77d(6)

When to File: A notice must be filed no later than 15 days after the first sale of securities in the offering. A notice is deemed filed with the U.S. Securities and Exchange Commission (SEC) on the earlier of the date it is received by the SEC at the address given below or, if received at that address after the date on which it is due, on the date it was mailed by United States registered or certified mail to that address.

Where to File: U.S. Securities and Exchange Commission, 450 Fifth Street, N.W., Washington, D.C. 20549

Copies Required: Five (5) copies of this notice must be filed with the SEC, one of which must be manually signed. Any copies not manually signed must be photocopies of the manually signed copy or bear typed or printed signatures.

Information Required: A new filing must contain all information requested. Amendments need only report the name of the issuer and offering, any changes thereto, the information requested in Part C, and any material changes from the information previously supplied in Parts A and B. Part E and the Appendix need not be filed with the SEC.

Filing Fee: There is no federal filing fee.

State:

This notice shall be used to indicate reliance on the Uniform Limited Offering Exemption (ULOE) for sales of securities in those state that have adopted ULOE and that have adopted this form. Issuers relying on ULOE must file a separate notice with the Securities Administrator in each state where sales are to be, or have been made. If a state requires the payment of a fee as a precondition to the claim for the exemption, a fee in the proper amount shall accompany this form. This notice shall be filed in the appropriate states in accordance with state law. The Appendix to the notice constitutes a part of this notice and must be completed.

ATTENTION

Failure to file notice in the appropriate states will not result in a loss of the federal exemption. Conversely, failure to file the appropriate federal notice will not result in a loss of an available state exemption unless such exemption is predicated on the filing of a federal notice.

A. BASIC IDENTIFICATION DATA 2. Enter the information requested for the following: Each promoter of the issuer, if the issuer has been organized within the past five years; Each beneficial owner having the power to vote or dispose, or direct the vote or disposition of, 10% or more of a class of equity securities of the issuer: Each executive officer and director of corporate issuers and of corporate general and managing partners of partnership issuers; and Each general and managing partner of partnership issuers. Check Box(es) that Apply: Promoter ⊠ Beneficial Owner Executive Officer □ Director General and/or Managing Partner Full Name (Last name first, if individual) Nordell, Peter W. **Business or Residence Address** (Number and Street, City, State, Zip Code) c/o NextSlide Imaging, LLC, 157 Common Lane, Beverly, MA 01965 Check Box(es) that Apply: Promoter Beneficial Owner Executive Officer □ Director General and/or Managing Partner Full Name (Last name first, if individual) Eliasen, Albert A. **Business or Residence Address** (Number and Street, City, State, Zip Code) c/o NextSlide Imaging, LLC, 157 Common Lane, Beverly, MA 01965 Check Box(es) that Apply: ☐ Promoter ☐ Beneficial Owner Executive Officer ☐ Director General and/or Managing Partner Full Name (Last name first, if individual) Business or Residence Address (Number and Street, City, State, Zip Code) Check Box(es) that Apply: Promoter ■ Beneficial Owner Executive Officer □ Director ☐ General and/or Managing Partner Full Name (Last name first, if individual) Business or Residence Address (Number and Street, City, State, Zip Code) Check Box(es) that Apply: Promoter ☐ Beneficial Owner Executive Officer Director General and/or Managing Partner Full Name (Last name first, if individual) **Business or Residence Address** (Number and Street, City, State, Zip Code) Check Box(es) that Apply: Promoter Beneficial Owner Executive Officer □ Director General and/or Managing Partner Full Name (Last name first, if individual) Business or Residence Address (Number and Street, City, State, Zip Code) Check Box(es) that Apply: Promoter Beneficial Owner Executive Officer Director General and/or Managing Partner Full Name (Last name first, if individual) Business or Residence Address (Number and Street, City, State, Zip Code) Check Box(es) that Apply: Promoter ■ Beneficial Owner Executive Officer Director ☐ General and/or Managing Partner Full Name (Last name first, if individual) Business or Residence Address (Number and Street, City, State, Zip Code)

·				B. INF	ORMATIC	ON ABOU	ľ OFFERI	NG				
1. Has the iss	suer sold, c	or does the i	ssuer intend	i to sell, to	non-accred	ited investo	ers in this o	ffering?			Yes 🗆	No ⊠
			Ans	wer also in	Appendix,	Column 2,	if filing un	der ULOE.				
2. What is th	e minimun	n investmen	t that will b	e accepted	from any in	ndividual?	***************************************				\$_200	,000
3. Does the o	offering per	mit joint ov	vnership of	a single un	it?	**************				••••	Yes 🖂	No □
If a person or states, li	n or simila to be listed ist the nam dealer, yo	r remunerat d is an assoc e of the bro u may set fo	tion for soli ciated perso ker or deals orth the info	citation of on or agent er. If more	purchasers of a broker than five (S	in connecti or dealer re 5) persons t	on with sale gistered wi o be listed	es of securit	ties in the o and/or with	ffering. a state		
`		·	ŕ									
Business or R	lesidence A	Address (Nu	mber and S	treet, City,	State, Zip (Code)						
Name of Asso	ociated Bro	ker or Deal	er									
States in Whi		Listed Has S or check ind									Г	All States
[AL]	[AK]	(AZ)	[AR]	[CA]	[CO]	[CT]	[DE]	[DC]	(FL)	[GA]	 [HI]	_
(IL)	[IN]	[IA]	[KS]	[KY]	[LA]	(ME)	[MD]	[MA]	[MI]	[MN]	[MS]	
[MT]	[NE]	[NV]	[NH]	[נאן	[NM]	[NY]	[NC]	[ND]	[OH]	[OK]	[OR]	
[RI]	[SC]	[SD]	[TN]	[TX]	[UT]	[VT]	[VA]	[WA]	[WV]	[WI]	[WY]	[PR]
Business or R	Cesidence A	Address (Nu	mber and S	treet, City,	State, Zip (Code)						
Name of Asso	ociated Bro	ker or Deal	ег									
States in Whi		Listed Has S or check ind										All States
[AL]	[AK]	[AZ]	[AR]	[CA]	[CO]	[CT]	[DE]	[DC]	[FL]	[GA]	[HI]	
[II.]	[IN]	[IA]	[KS]	[KY]	[LA]	[ME]	[MD]	[MA]	[MI]	[MN]	[MS]	[MO]
[MT]	[NE]	[NV]	[NH]	[NJ]	[NM]	[NY]	[NC]	[ND]	[OH]	[OK]	[OR]	[PA]
[RI]	[SC]	[SD]	[TN]	[TX]	[UT]	[VT]	[VA]	[WA]	[WV]	[WI]	[WY]	[PR]
Full Name (L	ast name fi	rst, if indivi	idual)					-				
Business or R	esidence A	ddress (Nu	mber and S	treet, City,	State, Zip C	Code)						 , , , , , , , , , , , , , , , , , ,
Name of Asso	ociated Bro	ker or Deale	er		_					- 11 /		
States in Whi		Listed Has S				hasers						All States
[AL]	[AK]	[AZ]	[AR]	(CA)	[CO]	[CT]	[DE]	[DC]	(FL)	[GA]	 [HI]	
[IL]	[IN]	[IA]	[KS]	[KY]	[LA]	[ME]	[DD]	[MA]	[MI]	[MN]	[MS]	
[MT]	[NE]	[NV]	[NH]	[[N]]	[NM]	[NY]	[NC]	[ND]	[OH]	[OK]	[OR]	[PA]
נותו	(SC)	(SD)	(TNI)	(TY)	(1 fT)	(VT)	(VA)	[WA]	[WV]	tun	[U/V]	

C. OFFERING PRICE, NUMBER OF INVESTORS, EXPENSES AND USE OF PROCEEDS

1.	Enter the aggregate offering price of securities included in this offering and the total amount already sold. Enter "0" if answer is "none" or "zero." If the transaction is an exchange offering, check this box \(\subseteq \) and indicate in the columns below the amounts of the securities offered for exchange and already exchanged.		
	and arready exchanged.	Aggregate	Amount Already
	Type of Security	Offering Price	Sold
	Debt	\$N/A	\$N/A
	Equity	\$500,000	\$ <u>450,000</u>
	☐ Common ☑ Preferred		
	Convertible Securities (Series B Preferred Unit Warrants exercisable at \$.45 per share)	\$ <u>0</u>	s o
	Partnership Interests	\$N/A	\$N/A
	Other	\$N/A	\$N/A
	Total		\$ 450,000
	Answer also in Appendix, Column 3, if filing under ULOE.		
2.	Enter the number of accredited and non-accredited investors who have purchased securities in this offering and the aggregate dollar amounts of their purchases. For offerings under Rule 504, indicate the number of persons who have purchased securities and the aggregate dollar amount of their purchases on the total lines. Enter "0" if answer is "none" or "zero."	Number Investors	Aggregate Dollar Amount of Purchases
	Accredited Investors	1	\$ <u>450,000</u>
	Non-accredited Investors	0	s 0
	Total (for filings under Rule 504 only)	N/A	\$ <u>N/A</u>
	Answer also in Appendix, Column 4, if filing under ULOE.		
3.	If this filing is for an offering under Rule 504 or 505, enter the information requested for all securities sold by the issuer, to date, in offerings of the types indicated, in the twelve (12) months prior to the first sale of securities in this offering. Classify securities by type listed in Part C - Question 1.		
	Type of offering	Type of	Dollar Amount
	Rule 505	Security N/A	Sold
			\$ <u>N/A</u>
	Regulation A	N/A	\$ <u>N/A</u>
	Rule 504	N/A	\$ <u>N/A</u>
	Total	N/A	\$ <u>N/A</u>
4.	 a. Furnish a statement of all expenses in connection with the issuance and distribution of the securities in this offering. Exclude amounts relating solely to organization expenses of the issuer. The information may be given as subject to future contingencies. If the amount of an expenditure is not known, furnish an estimate and check the box to the left of the estimate. 		
	Transfer Agent's Fees		□ s <u> </u>
	Printing and Engraving Costs		□ s
	Legal Fees		S 10,000
	Accounting Fees		□ \$
	Engineering Fees		□ \$ 0
	Sales Commissions (specify finders' fees separately)		□ \$ 0
	Other Expenses (identify) <u>blue sky filing fees</u> Total		□ \$ <u>100</u> ⊠ \$ 10.100
	rutar		

C. OFFERING PRICE	, NUMBER OF INVESTORS, EXPENSI	ES AND USE OF	PROCEEDS	
 Enter the difference between the aggrega 1 and total expenses furnished in respons "adjusted gross proceeds to the issuer." 	te offering price given in response to Part C e to Part C - Question 4.a. This difference i	s the		\$ <u>439,900</u>
 Indicate below the amount of the adjusted g used for each of the purposes shown. If the estimate and check the box to the left of the the adjusted gross proceeds to the issuer set 	amount for any purpose is not known, furni estimate. The total of the payments listed n	sh an nust equal		
			Payments to Officers, Directors, & Affiliates	Payments To Others
Salaries and fees			□ s 0	S 0
Purchase of real estate			□ s 0	\$ 0
Purchase, rental or leasing and installati	on of machinery and equipment		□ \$ <u> </u>	S 0
Construction or leasing of plant building	gs and facilities		□ \$ 0	\$ 0
offering that may be used in exchange for	ng the value of securities involved in this or the assets or securities of another		□ s 0	□ s 0
* *			□ \$ <u> </u>	
• •			□ s 0	
- •			□ s 0	□ \$ 0
			□ s 0	_
Total Payments Listed (column totals ad	lded)		⊠	439,900
	D. FEDERAL SIGNATURE			
The issuer has duly caused this notice to be following signature constitutes an undertaked of its staff, the information furnished by the	e signed by the undersigned duly authorizing by the issuer to furnish to the U.S. Secur	rities and Exchan	ge Commission, u	pon written request
Issuer (Print or Type)	Signatur		Date	,
NextSlide Imaging, LLC	1 HOUSE		September 24	1, 2008
Name of Signer (Print or Type)	Title of Signer (Print or Type)			
- · · · · · ·				
Peter W. Nordell, Jr.	Manager	Ī		

ATTENTION —

Intentional misstatements or omissions of fact constitute federal criminal violations. (See 18 U.S.C. 1001.)

	E. STATE SIGNATURE		
Is any party described in 17 CFR 230.262 of such rule?		cation provisions	Yes No
	See Appendix, Column 5, for state r	response.	
2. The undersigned issuer hereby undertakes Form D (17 CFR 239,500) at such times a		ny state in which this notice is	s filed, a notice on
3. The undersigned issuer hereby undertakes issuer to offerees.	to furnish to the state administrators, upo	on written request, information	n furnished by the
4. The undersigned issuer represents that the limited Offering Exemption (ULOE) of th of this exemption has the burden of estable	e state in which this notice is filed and u	inderstands that the issuer clai	
The issuer has read this notification and know undersigned duly authorized person.	rs the contents to be true and has duly car	used this notice to be signed o	on its behalf by the
Issuer (Print or Type)	Signature	Date	e
NextSlide Imaging, LLC	1 Chost 1	/ Sep	tember 24, 2008
Name of Signer (Print or Type)	Title of Signer (Print or Type)		
Peter W. Nordell, Jr.	Manager		

Instruction

Print the name and title of the signing representative under his signature for the state portion of this form. One copy of every notice on Form D must be manually signed. Any copies not manually signed must be photocopies of the manually signed copy or bear typed or printed signatures.

APPENDIX

1	2 3 4 5									
	Intend to non-a investor	i to sell accredited as in State 3-Item 1	Type of security and aggregate offering price offered in state (Part C Item 1)		Type of investor and amount purchased in State (Part C-Item 2)			Disqualification under State ULOE (if yes, attach explanation of waiver granted) (Part E-Item 1)		
State	Yes	No	Units of limited liability company interest	Number of Accredited Investors	Amount	Number of Non- Accredite d Investors	Amount	Yes	No	
AL										
AK										
AZ										
AR										
CA										
co										
CT										
DE										
DC										
FL										
GA					· · · · · · · · · · · · · · · · · · ·					
HI										
ID										
IL										
IN										
IA										
KS										
KY			-						,	
LA							·····			
ME				:						
MD										
MA										
MI										
MN										
MS										

APPENDIX

1	2		2 3 4							
	to non-a	d to sell accredited rs in State 3-Item 1	Type of security and aggregate offering price offered in state (Part C Item 1)				u	Disqualification under State ULOE (if yes, attach explanation of waiver granted) (Part E-Item 1)		
State	Yes	No	Units of limited liability company interest	Number of Accredited Investors	Amount	Number of Non-Accredited Investors	Amount	Yes	No	
МО										
MT					<u> </u>					
NE										
NV										
NH										
NJ		•								
NM			-							
NY										
NC										
ND										
ОН		X	\$500,000	1	\$450,000	0	\$0		X	
OK										
OR										
PA										
RI							ļ			
SC	-									
SD									-	
TN										
TX			· - -							
UT				-						
VT				-					 -	
VA				-						
WA WV			*							
WI			····				<u> </u>		-	
W I										

APPENDIX 3 4 Disqualification under State ULOE Type of security and aggregate offering price offered in state (Part C Item 1) Intend to sell Type of investor and (if yes, attach to non-accredited amount purchased in State explanation of investors in State (Part C-Item 2) waiver granted) (Part B-Item 1 (Part E-Item 1) Units of limited Number of Number of Accredited Non-Accredited State Yes No liability Investors Amount Investors Amount Yes No company interest WY PR

